SPM #10 (#16): Percent of MCH clients/families who receive one or more supportive services to enhance child health, development and/or safety.

Relationship to Priority Need(s): SPM #16 relates to Wisconsin's Priority Need #2 - Health Access and #10 - Injury.

a) Report of 2003 Major Activities

1. Supportive Services—Enabling Services—Children, including CSHCN and their Parents

MCH providers beginning for the 2003 contracts used the SPHERE data system; 40% of 93 agencies indicated provision of supportive services as documented per the subintervention system. Because of the late start up of SPHERE, the numbers may be underreported.

For the purposes of reporting this measure, supportive and enabling services for children including CSHCN and their parents to support child health, development and/or safety include the following public health interventions and categories of subinterventions (adapted from the state of MN Department of Health) during 2003 follows.

Advocacy-Subinterventions: Access to dental care (1); Access to health care (17); CSHCN Services (18); Total Activities = 36 for 34 clients.

<u>Case Management</u>-Subinterventions: All CSHCN Service Coordination (526); Child Care Coordination (16); Infant Assessment (609); all Targeted Case Management Assessment (1,148); Total Activities = 2,299 for 1,684 clients.

<u>Counseling</u>-Subinterventions: Access to primary care (16); Access to specialty care (3); Parent/Family Support (31); Support System (15); Total Activities = 65 for 58 clients.

Health Teaching-Subinterventions: Access to care (48); Adolescent Health (33); Bicycle-related (10); Brain Development (226); Burns/Hot Water Safety (84); CSHCN Services (59); Daycare (78); Child Growth & Development (395); Child Health: Preschool (93); Child Health: School Age (38); Child Passenger Safety (752); Choking (50); Community Resources (72); Drowning/Water Safety (4); Environmental Lead (71); Environmental Tobacco (59); Fire-related (74); Guns/firearms (136); Health Promotion (35); Home Safety (220); Infant care (365); Motor Vehicle-Related (7); Oral Health (149); Parenting (328); Primary Prevention Immunizations (108); SIDS/Infant death (43); Total Activities = 3,537 for 3,246 clients.

<u>Referral & Follow up</u>-Subintervention: B-3 (176); Child Care Coordination (23); Family Support (71); Health Benefits (159); Mental Health (48); Parent Liaison (34); Parent to Parent (101); Parenting Program (34); Primary care (253); Regional CSHCN Center (50); Specialist (82); Specialist Clinic (63); Support Group (69); Total Activities = 1,163 for 1,055 clients.

<u>Screening</u>-Subintervention: Developmental Assessment (1,343); Feeding Assessment (91); Fluoride Assessment (463); Infant Assessment (210); Injury Prevention Assessment (391); Parent-Child Interaction (147); Office exam (980); Total activities = 3,625 for 2,725 clients.

Overall Total Activities = 10,725 for 8,802 clients; 73.7% of reported MCH clients.

Activities specifically targeting parents of children with special health care needs that occurred in 2003 included the continued identification of parent support opportunities by the CPLs and the Parent to Parent Matching Program. The program developed a Training Curriculum for Supporting Parents and outreach material to begin identification of potential support parents.

b) Current 2004 Activities

1. Supportive Services—Enabling Services—Children, including CSHCN and their parents

Title V funded services in the 2004 consolidated contract, 96 LPHDs and other private non-profit agencies submitted 306 objectives to provide MCH/CSHCN services. About 31% (94 objectives) were to provide supportive services to parents of children and youth to age 21 years, including children with special health care needs. Forty-one of the services were related to child safety in the following areas: home safety assessments, safe use of child passenger systems, bicycle safety instruction, and individual or group education for parents to promote child safety.

2004 activities include the training of support parents in each of the five DPH regions throughout the first half of the year with actual matching of parents beginning June 1. Continued connection of parents to other support opportunities such as parent support groups is occurring as well.

2. Governor's "KidsFirst" Initiative—Infrastructure Building Services—Pregnant women, mothers, infants and children, including CSHCN

In May 2004, Governor Doyle announced a four-part "KidsFirst" Initiative. The four focus areas are entitled Ready for Success, Safe Kids, Strong Families and Healthy Kids. This direction from the Governor and his cabinet leaders will provide a course for state programs to enhance supportive services for families and their children in Wisconsin.

3. Governor's Call to Action Summit on Child Abuse and Neglect—Infrastructure Building Services— Pregnant women, mothers, infants and children, including CSHCN

On April 29 and 30, 2004 an invitational summit was held to initiate planning and begin work on a State Call to Action to end child abuse and neglect. About 150 Wisconsin leaders who are involved in preventing child abuse and neglect, protecting children, and helping heal victimized children joined the Governor to discuss strategies to prevent child maltreatment. Locally planned webcasts of the event are occurring May 17 through June 30, 2004 to incorporate points in the State Call to Action planning process.

c) 2005 Plan/Application

1. Supportive services—Enabling Services—Children, including CSHCN and their parents

The Wisconsin Title V program is on course to fund services during 2005 that support families including children with special health care needs according to the consolidated contract opportunities for the LPHDs. Local agencies will continue to provide a variety of services that enhance child/youth health and safety skills and abilities of MCH/CSHCN clients in both individual and group settings. Activities that promote injury prevention in areas of home safety and child passenger transportation will continue. The SAFE KIDS Coalition in cooperation with two children's hospitals continues to be a strong influence in Wisconsin and will have a

special focus on child passenger safety as referenced in the Safe Kids chapter of Governor Doyle's "KidsFirst" Initiative.

The Parent to Parent Matching Program will continue to be funded with Title V dollars to provide supportive services to parents of children with special health care needs throughout 2005.

2. Governor's "KidsFirst" Initiative—Infrastructure Building Services—Pregnant women, mothers, infants and children, including CSHCN

In May 2004, Governor Doyle announced a four-part "KidsFirst" Initiative. Part three is Strong Families and includes focus activities that will create opportunities for every parent to become self-sufficient, and give families the support they need to raise their children in safe, stable homes. These areas include: initiate a universal home visiting program and connect families with support services. The MCH program will provide leadership and participation in action steps toward improvements in these family support areas.

3. Governor's Call to Action Summit on Child Abuse and Neglect—Infrastructure Building Services— Pregnant women, mothers, infants and children, including CSHCN

During the next year the MCH program will provide leadership and participation in the Call to Action plan to implement steps to end child abuse and neglect. Key leadership of the MCH program will be in the area of primary prevention in partnership with LPHDs who work with families and children at risk.